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7590 05/23/2007  
**PILLSBURY WINTHROP SHAW**  
**PITTMAN LLP**  
**ATTN: DOCKETING DEPARTMENT**  
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

**Patricia Munoz** (Depositor's name)  
*Patricia Munoz* (Signature)  
**June 8, 2007** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/731,411	12/08/2003	Paul A. Cox	045007-0307218	3942

**TITLE OF INVENTION: SCREENING FOR NEUROTOXIC AMINO ACID OR NEUROTOXIC DERIVATIVE THEREOF ASSOCIATED WITH NEUROLOGICAL DISORDERS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	08/23/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
KOLKER, DANIEL E	1649	435-007100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Pillsbury Winthrop Shaw**  
 2 **Pittman LLP**  
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**THE INSTITUTE FOR ETHNOMEDICINE**

**PROVO, UTAH**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee  
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Donna O. Perdue*  
 Typed or printed name **Donna O. Perdue**

Date **June 8, 2007**  
 Registration No. **51,166**

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